

## Air Force Theater Hospital doubles surgeries treating Iraqis

by Lt. Col. Bob Thompson  
332nd Air Expeditionary Wing Public Affairs

8/14/2006 - BALAD AIR BASE, Iraq (AFPN) -- Air Force Theater Hospital records here indicate that in the past year the number of combat-wounded Iraqis is increasing while U.S. casualties seen at the hospital are beginning to decrease.

In a strange twist, this means more work for the U.S. Air Force and Army surgeons who performed more than 1,200 surgical procedures in July, nearly doubling April's tally.

"Today, the ratio of trauma patients is about 40 percent U.S. and 60 percent Iraqi," said Col. George P. Costanzo, 332nd Expeditionary Medical Group commander here. "Eight months ago, the ratio was about 57 percent U.S., 45 percent from Iraq and about 8 percent from other countries."

These ratios have a direct bearing on the number of surgical procedures the doctors must perform, the colonel said. For American patients, the goal is to stabilize them and get them on their way out of theater to the next level of higher care as soon as possible.

"American trauma patients usually average only about 25 to 26 and a half hours in Iraq before being shipped to Germany," said Maj. (Dr.) Cabot Murdock, Air Force thoracic surgeon here. "Sometimes it is less than six hours."

To stabilize American trauma patients for movement often requires a couple of operations. However, many Iraqi patients don't have immediate access to higher medical care so they stay at the Air Force Theater Hospital longer, requiring procedures beyond stabilization and follow-up care to prepare them for release.

"When you add up combat-wounded and the routine patients we get with minor illness or sprained ankles, we see an average of about 700 sick and injured patients a month," Colonel Costanzo said. "Of that, about 500 are U.S. troops; about 170 are Iraqi soldiers, police and civilians. About 30 are other nationalities including insurgents, unknowns and contractor employees from other countries."

"The insurgents say they do Jihad against the Americans but what they do is kill innocent civilians," said Ali, an Iraqi soldier who asked that his full name not be used. Ali is a patient in the intensive care ward here being treated for roadside bomb injuries he received near the Syrian border.

Through an interpreter, he said that the care he has received was above his expectations and that the doctors do not differentiate between Iraqis and U.S. troops. All were treated the same.

Another Iraqi patient, Ahmed, who also asked that his full name not be used, stated that he had received excellent care, too. He was recovering from being shot Aug. 6 by a sniper in the Ar Ramadi province. He said he was not surprised to get injured because the province is very dangerous.

Fighting insurgents and trying to stop violence between religious factions is a difficult challenge because none wear uniforms, and all factions target civilians, Iraqi Police, Iraqi army and American troops.

However, surgeons at the Air Force Theater Hospital treat all based on medical needs.

"We like to say that political and religious differences stop outside the door," Colonel Costanzo said. "We prioritize patients based on the severity of their injuries so that everyone gets the same quality of treatment no matter who they are."

"It surprised me, but it doesn't bother me to treat detainees," said Capt. (Dr.) Paul DeFlorio, an emergency room doctor deployed from Lackland Air Force Base, Texas. Captain DeFlorio teaches at the Wilford Hall Medical Center, one of the largest military hospitals in the United States. The center handles about 120 trauma cases per month. Here, the hospital averages about 250.

"It's one thing to see it written as part of the rules that say you're supposed to, but before I got here, I wasn't sure how I'd feel about it," the captain said about treating insurgents. "I guess your medical instincts kick in to take care of the patient, no matter who he is."

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